State of Rhode Island and Providence Plantations Department of Administration Division of Purchases

RIVIP BIDDER CERTIFICATION COVER FORM

SECTION 1 - BIDDER INFORMATION

Bidder must be registered as a vendor on the RIVIP system at www.purchasing.ri.gov to submit a bid proposal.

Solicitation Number:

7550099

Solicitation Title:

FIRE PROTECTION SYSTEMS INSPECTIONS, TESTING & SERVICE - URI (28 PGS) AND 1

ZIP FILE

Bid Proposal Submission

Deadline Date & Time:

1/5/2016

11:30 AM

RIVIP Vendor ID #:

30555

Bidder Name:

Allstate Fire Protection, Inc

Address:

1525 Old Louisquiset Pike

Unit - S 3

Lincoln, RI 02865

USA

Telephone:

(401) 725-2600

Fax:

(401) 725-2601

Contact Name: Contact Title:

Bruce Cournoyer

Business Manager

Contact Email:

bcournoyer@allstatefire.net

SECTION 2 — DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below. Complete Disclosure 5. If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other owners that hold at least 10% of the record or beneficial equity interests of the Bidder.

1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.

3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.

- 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasipublic corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.
 - 5. List each officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder.

Disclosure details (continue on additional sheet if necessary):

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SECTION 3 — CERTIFICATIONS

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.

THE BIDDER CERTIFIES THAT:

- 1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to this solicitation.
- 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.
- 3. The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.
- 4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.
- 1 5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.
- 6. This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal of the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.
- 7. The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.
 - 8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.

State of Rhode Island and Providence Plantations Rhode Island Department of Labor and Training

FIRE PROT MASTER 00000042

PASCALE 87 CAMPBELL AVENUE NORTH PROVIDENCE R1 02904

JOHN SHAW Administrator

07/31/2016 Expiration Date

PHOTO I.D. REQUIRED WITH THIS LICENSE

Not valid without signature.

If found, please return to: DLT, 1511 Pontiac Avenue, Cranston, RI 02920-0943 Ph: (401) 462-8580 www.dlt.ri.gov/profregs

Certification details (continue on additional sheet if necessary):	
State of Rhode Island through the Division of P solicitation and the bid proposal. The Bidder certing agrees to comply with its terms and conditions; (2 information submitted in the bid proposal (included complete. The Bidder acknowledges that the terms be incorporated into any contract awarded to the Boderson signing below represents, under penalty of the solicities.	nt to this solicitation constitutes an offer to contract with the urchases on the terms and conditions contained in this fies that: (1) the Bidder has reviewed this solicitation and) the bid proposal is based on this solicitation; and (3) the ing this Bidder Certification Cover Form) is accurate and and conditions of this solicitation and the bid proposal will idder pursuant to this solicitation and the bid proposal. The of perjury, that he or she is fully informed regarding the has been duly authorized to execute and submit this bid
	BIDDER
Date: 12 31 15	Allstate Fire Protection, Inc. 1525 Old Louisquisset Pike Unit S-3 Lincoln, RI 02865
1 - 1	Name of Bidder Signature in ink
	BRUCE L. COURNOYER TREASURER. Printed name and title of person signing on behalf of Bidder

2013-4

2/20/2015

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TEM	DESCRIPTION	QTY	UOM	UNIT	EXTENDED
NO.				PRICE	PRICE
	GROUP PURCHASING ORGANIZATIONS (GPO): THE UNIVERSITY OF RHODE ISLAND IS A MEMBER OF THE FOLLOWING: 1) Educational & Institutional Cooperative Purchasing (E&I) 2) Provista				
	There will be a mandatory pre-bid conference:				
	BLANKET REQUIREMENTS: 1/1/16 - 12/31/18				
	FIRE PROTECTION SYSTEMS INSPECTIONS, TESTING, and SERVICE for the University Rhode Island's Main Campus (Kingston), Narragansett Bay Campus, and W. Alton Jone Campus per the attached specifications.				
1	1/1/16-6/30/16 Quarterly Inspection, testing and maintenance	2	each \$_	5,950	\$ 11,900
	7/1/16-6/30/17 Quarterly Inspection, testing and maintenance	4	each \$_	5,950	\$ 23,800
	7/1/17-6/30/18 Quarterly Inspection, testing and maintenance	4	each \$_	5,950	\$ 23,700
	7/1/18-12/31/18 Quarterly Inspection, testing and maintenance	2	each \$_	5,950	\$ 11,900
5	Trip Test of all dry systems	1	each \$_	9,950	\$ 9,900
6	1/1/16-6/30/16 Quarterly Releasing systems inspection 100% tested every quarter as required	2	each \$_	760	\$ 1,400
	7/1/16-6/30/17 Quarterly Releasing systems inspection 100% tested every quarter as required	4	each \$_	700	\$ 2,800
	7/1/17-6/30/18 Quarterly Releasing systems inspection 100% tested every quarter as required	4	each \$_	700	\$ 2,800
9	7/1/18-12/31/18 Quarterly Releasing systems inspection 100% tested every quarter as required	2	each \$_	700	\$ 1, 400
10	7/1/16-6/30/17 Fire pump annual flow tests	1	each \$_	5,100	_ \$5,1ಡ್
11	7/1/17-6/30/18 Fire pump annual flow tests	1	each \$_	5,100	\$ 5,100
12	7/1/18-12/31/18 Fire pump annual flow tests	1	each \$_	5,100	\$ 5,100
13	Obstruction investigation - assume once per contract period	کلکتی . ۱	each \$_	225	\$ 8,100
	Repair work performed shall be considered public works per RI General Laws 37-13, and therefo awarded vendor shall be required to pay his/her employees the applicable prevailing wage rates. Routine maintenance work is not considered public works and is not subject to prevailing wage	•			
1.1	1/1/16-6/30/16 Hourly rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)	20	hour \$	98	\$ 1,960
14	7/1/16-6/30/17 Hourly rate on site for a sprinkler little for repairs as needed (Prevailing Wage)	40	hour \$	99	\$ 3,920
15 16	7/1/16-6/30/17 Hourly rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)	40	hour \$_	100	\$ A. 000
17	7/1/18-12/31/18 Hourly rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)	20	hour \$_	lan	\$ 2,000
18	1/1/16-6/30/16 Hourly rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)	20	hour \$_	65	\$ 1,300
19	7/1/16-6/30/17 Hourly rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)	40	hour \$_	65	\$ 2,600
20	7/1/17-6/30/18 Hourly rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)	40	hour \$_	82	\$ 2,720

7/1/18-12/31/18 Hourly overtime rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage) 29

% off list price for materials, assume an annual list cost \$5,000.00

7/1/18-12/31/18 Hourly rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)

1/1/16-6/30/16 Hourly overtime rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)

7/1/16-6/30/17 Hourly overtime rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)

7/1/17-6/30/18 Hourly overtime rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)

7/1/18-12/31/18 Hourly overtime rate on site for a sprinkler fitter for repairs as needed (Prevailing Wage)

1/1/16-6/30/16 Hourly overtime rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)

7/1/16-6/30/17 Hourly overtime rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)

7/1/17-6/30/18 Hourly overtime rate on site for a sprinkler apprentice for repairs as needed (Prevailing Wage)

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FORM W-9 REV 8/15

STATE OF RHODE ISLAND FORM W-9 PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION



THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpayer Identification Number (T.I.N.)		
Enter your taxpayer identification number in Social Security No. (SSN) Employer ID No. (EIN)		
the appropriate box. For most individuals, this is your social security number.		
	20 2184209	
NAME Allstate Fire Prot	ection. Inc.	
ADDRESS 1525 Old Louisquisse	et Pike Unit S-3	
CITY, STATE AND ZIP CODE	U2865	
PAYMENT REMITTANCE ADDRESS, IF DIFFERENT FROM THE ADI	DRESS ABOVE	
ADDRESS		
CITY, STATE AND ZIP CODE		
CERTIFICATION: Under penalties of perjury, I certify that: (1) The number shown on this form is my correct Taxpayer Identification	n Number (or Lam waiting for a number to be issued to mo), and	
(2) I am not subject to backup withholding because either: (A) I am ex	empt from backup withholding, or (B) I have not been notified by	
the Internal Revenue Service (IRS) that I am subject to backup wit or (C) the IRS has notified me that I am no longer subject to backup	nnolding as a result of a failure to report all interest or dividends, withholding.	
(3) I am a U.S. citizen or other U.S. person (as defined by the IRS).		
Certification Instructions You must cross out item (2) above if you	have been notified by the IRS that you are currently subject to	
backup withholding because you have failed to report all interest and di does not apply.	vidends on your tax return. For real estate transactions, item (2)	
Please sign here and provide title, date and telephone number:		
B BC =		
Original Signature Required (Digital Signature Not Acceptable)	ASURER DATE 12/31/15 TEL NO 401-725-2600	
BUSINESS DESIGNATION:		
_	st/Estate Government/Nonprofit Corporation	
Partnership Medical Services Corpora		
LLC Tax Classification: Single Member (Individ	lual) 🗌 Partnership 🗋 Corporation 🗌	
TIPS:		
NAME: Be sure to enter your full and correct legal name as shown on your ADDRESS, CITY, STATE AND ZIP CODE: If you operate a business at	our income tax return for the SSN or EIN provided.	
1) Same EIN with more than one location attach a list of location ad	dresses with remittance address for each location and Indicate to	
which location the year-end tax information return should be mailed 2) Different EIN for each different location submit a completed W-9 f		
return will be reported for each EIN and remittance address.)		
Mail Completed Form To:	For State Use Only:	
Supplier Coordinator Purchasing Department	·	
One Capitol Hill, 2nd Floor Providence RI 02908	IRSRI SOSFEDOther	
	RI Supplier # Approved	
Or Email To: doa.pursuppliercoordinator@purchasing.ri.gov	Date Entered Entered By	

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Labor and Training

Center General Complex 1511 Pontiac Avenue Cranston, RI 02920-4407

Telephone: TTY:

(401) 462-8000 Via RI Relay 711

Lincoln D. Chafee Governor Charles J. Fogarty Director

13. Comply with all applicable provisions of RIGL §37-13-1, et. seq;

Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at www.dlt.ri.gov/pw.

CERTIFICATION

I hereby certify that I have reviewed this CONTRACT ADDENDUM and understand my obligations as stated above.

Title:

Subscribed and sworn before me this 31⁵ day of leceule., 2015

Notary Public

My commission expires: 2 7

An Equal Opportunity Employer/Program, /Auxiliary aids and services are available upon request to individuals with disabilities.

TTY via RI Relay 711



Public Works Bid Preparation Checklist

Date: 12/7/2015

Bid#: 7550099

Title: Fire Protection Systems Inspections, Testing & Service, URI

This checklist is provided to assist the bidder in preparing a bid proposal for submission. It is <u>not</u> a substitute for a thorough review of the Instruction to Bidders nor a comprehensive list of all bid proposal requirements. Each bidder is responsible to review the Instructions to Bidders and to comply with all requirements of the Solicitation.

Bid Proposal Package:

- RIVIP Bidder Certification Cover Form (completed) signed in ink
- ☐ Bid Form
 - All applicable blank spaces on the Bid Form have been completed
 - All Addenda have been acknowledged
 - Bid price printed legibly in ink (in both words and figures that match where specified)
 - Erasures or corrections have been initialed by person signing the Bid Form
 - Bid Form is signed in ink
- ☐ Bid Surety
 - Bid bond or certified check (for DOT projects, bid bond only)
 - Bid surety is five percent of the bid total (or such other specified amount)
 - Bid Bond is signed by the bidder and surety
 - Power of Attorney is attached to the Bid Bond showing the name of person who signed the surety bond
- Public Copy of bid proposal in pdf format on a read-only CD-R media disk
 General Contractor Apprenticeship Certification Form "2013-14" (for projects \$1,000,000 and greater) required at time of bid proposal submission

Note: General Contractor Apprenticeship Re-Certification and Certification Form "2013-16" and Subcontractor Apprenticeship Certification Form "2013-15" are not required at time of bid proposal submission deadline.

\boxtimes	Applicable professional licenses (as specified in the Solicitation)
	Rhode Island Contractor Registration Board No.
\boxtimes	All bid proposal documents in a sealed envelope with the specific Solicitation #, Solicitation title, and
	the bid proposal submission deadline marked in the upper left hand corner of the envelope
\boxtimes	Each bid proposal submitted in a separate sealed envelope
\boxtimes	Completed Form W-9
	Other

Buyer Name: John F. O'Hara II

Contact Information: 401-574-8125